8/26/99

6:49: PAGE 001/6

RightFAX

ARNALL GOLDEN & GREGORY, LLP

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

2800 ONE ATLANTIC CENTER
1201 WEST PEACHTREE STREET • ATLANTA, GEORGIA 30309-3450

TELEPHONE (404) 873-8500 • FACSIMILE (404) 873-8501

SENDER'S DIRECT FAX 404-873-8795

FROM:

Patrea L. Pabst

PHONE:

1.

DATE:

CLIENT/MATTER#:

August 26, 1999

20487/201

PLEASE DELIVER AS SOON AS POSSIBLE TO:

RECIPIENT

Examiner Patricia Duffy

U. S. Patent Office

COMPANY

FAX No. 703-308-4426

PHONE NO. 703-305-7555

Total number of pages including this page: 6
If you do not receive all the pages, please call 404-873-8500.

PLEASE DELIVER TO EXAMINER PATRICIA DUFFY IMMEDIATELY!!

Applicants:

Eugen Koren and Mirna Koscec

Serial No:

08/765,324

Art Unit:

1645

Filing date:

December 24, 1996

Examiner:

P. Duffy

For:

ANTIBODIES TO LIPOPROTEINS AND APOLIPOPROTEINS AND

METHODS OF USE THEREOF

PTO/SB/17 (12-98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL Complete If Known 08/765,324 Application Number for FY 1999 Filing Date December 24, 1996 Patent fees are subject to annual revision. Eugen Koren First Named Inventor Small Entity payments must be supported by a small entity statement, P. Duffy **Examiner Name** otherwise large entity fees must be paid. See Forms PTO/SB/09-12. 1645 Group / Art Unit TOTAL AMOUNT OF PAYMENT (\$) -0-Attorney Docket No. **OMRF 143 CIP(2)**

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)						
1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	Lar		ity Sn	NAL F nali Ent e Fe de (\$)	ity Eco	Description	Fee Paid	
Account Number 01-2507	105	130	205	5. 65	Surcharge - late	filing fee or oath		
Deposit Account Name Arnall Golden & Gregory, LLP	127	50	227	7 25		provisional filing fee	or	
Charge Any Additional Fee Required Linder	139	130	139	130	Non-English spe	ecification		
Fee Required Under .37 CFR 1.16 and 1.17	147	2,520	147	2,520	For filing a requ	est for reexamination		
2. Payment Enclosed:	112	9201	11	2 920	Requesting public Examiner action	lication of SIR prior to	,	
Check Money Other	113	1,840	• 11	3 1,840	Requesting public Examiner action	lication of SIR after		
FEE CALCULATION	115	110	215	55		ply within first month		
1. BASIC FILING FEE	116	380	216	190	Extension for rep	ply within second mor	nth	
Large Entity Small Entity	117	870	217	435	Extension for rep	ply within third month		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118	1,360	218	680	Extension for rep	ply within fourth mont	h	
101 760 201 380 Utility filling fee	128	1,850	228	925	Extension for rep	bly within fifth month		
106 310 206 155 Design filling fee	119	300	219	150	Notice of Appeal	•		
107 480 207 240 Plant filing fee	120	300	220	150	Filing a brief in s	upport of an appeal		
108 760 208 380 Reissue filing fee	121	260	2 2 1	130	Request for oral	hearing	,	
114 150 214 75 Provisional filling fee	138	1,510	138	1,510	Petition to institu	te a public use proce	eding	
	140	110	240	· 55	Petition to revive	- unavoidable		
SUBTOTAL (1) (\$)	141	1,210	241	605	Petition to revive	- unintentional		
2. EXTRA CLAIM FEES	142	1,210	242	605	Utility issue fee (or reissue)		
Fee from Ext <u>ra Claims below Fee Paid</u>	143	430	243	215	Design Issue fee			
Total Claims 3 -44 = 0 x = 0	144	580	244	290	Plant issue fee			
Independent 1 -7 = 0 X =0	122	130	122	130	Petitions to the C	ommissioner		
Multiple Dependent =	123	50	123	50	Petitions related t	to provisional applicat	tions	
Large Entity Small Entity	126	240	126	240	Submission of Inf	ormation Disclosure	Stmt	
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 58			40	Recording each patent assignment per property (times number of properties)			
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3	146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(a))			
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149 760 249 380 For each additional invention to be							
109 78 209 39 "Reissue independent claims over original patent	examined (37 CFR 1.129(b))							
110 18 210 9 ** Reissue claims in excess of 20	Other fee (specify)							
and over original patent	The second of the second secon							
SUBTOTAL (2) (\$) -0-	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)							
SUBMITTED BY		•				Complete #	applicable)	
Typed or Debat						Complete (if applicable)		
Printed Name Pairea E. Paost						Reg. Number	31,284	
Signature				Date	08/26/99	Deposit Account	01-2507	

Rightrax

U.S.S.N. 08/765,324 Filed: December 24, 1996 AMENDMENT

Allowance of all claims 43-46 is earnestly solicited.

Respectfully submitted,

Patrea L. Pabst Reg. No. 31,284

Date: August 26, 1999

ARNALL GOLDEN & GREGORY LLP 2700 One Atlantic Place 1201 West Peachtree Street Atlanta, GA 30309-3450 (404) 873-8102 (404) 873-8103 (fax)

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8(a)

I hereby certify that this paper, along with any paper referred to as being attached or enclosed, is being facsimile transmitted to the Assistant Commissioner for Patents, Washington, D.C. 20231 on the date shown below.

Date: August 26, 1999